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BIBDATASHEET

CONFIRMATION NO. 2869

Bib Data Sheet

SERIAL NUMBER 09/251,133	FILING DATE 02/16/1999 RULE	CLASS 514	GROUP ART UNIT 1642	ATTORNEY DOCKET NO. 70009590-001
APPLICANTS GIRIS, V. SHAH, AMARILLO, TX;				
** CONTINUING DATA ***** This appln claims benefit of 60/074,809 02/17/1998 CY				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 03/04/1999				
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>Cheney</i> Examiner's Signature	STATE OR COUNTRY TX	SHEETS DRAWING 21	TOTAL CLAIMS 5
				INDEPENDENT CLAIMS 1
ADDRESS JOSEPH A. MAHONEY MAYER, BROWN & PLATT P.O. BOX 2828 CHICAGO, IL 60690-2828				
TITLE NEUROENDOCRINE MARKER OF PROSTATE CANCER AND METHOD FOR PRODUCING SAME				
FILING FEE RECEIVED 802	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	



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** CONTINUING DATA *****

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35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

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TITLE

NEUROENDOCRINE MARKER OF PROSTATE CANCER AND METHOD FOR PRODUCING SAME

FILING FEE

RECEIVED
802

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